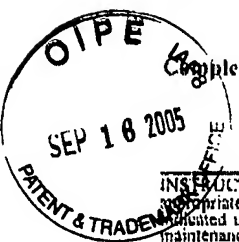


PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
 Commissioner for Patents
 P.O. Box 1450
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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3435n 7300 06/30/2005

ASHKAN NAJAFI, P.A.
 6817 SOUTHPOINT PARKWAY
 SUITE 2301
 JACKSONVILLE, FL 32216

09/16/2005 HDERESS2 00000074 10773633

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| |
|---------------------------|
| _____ (Date) |
| _____ (Signature) |
| _____ (Corporate Seal) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10773633 | 02/09/2004 | Thaddeus Faulkner | NNY2700 | 9358 |

TITLE OF INVENTION: POWER-OPERATED VEHICLE LIFTING SYSTEM

| APPL. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|------------------|--------------|----------------|-----------------|------------------|------------|
| nonprovisional | YES | \$700 | \$0 | \$700 | 11/30/2005 |
| EXAMINER | ART UNIT | CLASS-SUBCLASS | | | |
| WATSON, ROBERT C | 3723 | 254-423000 | | | |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

| |
|----------|
| 1. _____ |
| 2. _____ |
| 3. _____ |

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Thaddeus Faulkner

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

153 Hawthorne Ave
 Yonkers NY 10701

Please check the appropriate assignee category or categories (will not be printed on the patent): ☒ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

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☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 3715 720 730 9300, (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Thaddeus Faulkner

Date 9/15/05

Typed or printed name

Thaddeus Faulkner

Registration No _____

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